

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISS FEE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

36802

7590

05/19/2008

PACSETTER, INC.  
 15900 VALLEY VIEW COURT  
 SYLMAR, CA 91392-9221

08/15/2008 WASFAW2 00000060 160068 10792082

01 FC:1501 1440.00 DA  
 02 FC:8001 6.00 DA



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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Liliana Cancino (Depositor's name)  
 (Signature)  
 2008-08-14 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10792082	03/02/2004	Katie Hoberman	A04P1018	4890

TITLE OF INVENTION: CARDIAC STIMULATION DEVICE WITH ADJUSTABLE BLANKING INTERVALS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$0	\$1440	\$1440	08/19/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
BOCKELMAN, MARK	3766	607-009000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE PACSETTER, INC.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY) 15900 Valley View Court  
 Sylmar, CA 91392-9221

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted).  
☒ Advance Order - # of Copies 2

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 16-8088 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date

Typed or printed name Peter A. Nichols

Registration No. 47,288

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Practitioner's Docket No. A04P1018**PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of Hoberman et al.

Application No.: 10/792,082

Group No. 3766

Filed: 03/02/2004

Examiner: Mark Bockelman

For: Cardiac Stimulation Device with Adjustable Blanking Intervals

Mail Stop Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**APPLY PREVIOUSLY PAID ISSUE FEE IN ALLOWED RCE APPLICATION**

**NOTE:** Where a request for continued examination under 37 C.F.R. § 1.114 is filed in an allowed application after the issue fee has been paid and a petition under 37 C.F.R. § 1.313 is also filed and granted, the applicant does not have to pay the issue fee again if the application is thereafter allowed. The applicant may not obtain a refund of the issue fee which has been paid. However, if the application is subsequently allowed, an applicant may request that the previously submitted issue fee be applied toward payment of the issue fee required by the new notice of allowance. Such request should be sent as a reply to the new notice of allowance. See American Inventor's Protection Act of 1999, Question & Answer A14.

1. Please apply the issue fee which has been previously paid on 04/02/2008 (date) to the instant allowed RCE application.

**CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10\***

(When using Express Mail, the Express Mail label number is mandatory;  
Express Mail certification is optional.)

I hereby certify that, on the date shown below, this correspondence is being:

**MAILING**

- ☐ deposited with the United States Postal Service in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

37 C.F.R. § 1.8(a)

37 C.F.R. § 1.10 \*

- ☐ with sufficient postage as first class mail.

- ☐ as "Express Mail Post Office to Addressee"

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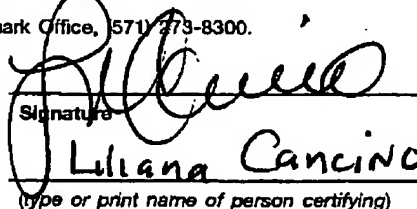
**TRANSMISSION**

- ☒ facsimile transmitted to the Patent and Trademark Office, (571) 273-8300.

Date:

8/14/08

Signature

  
Liliana Cancino  
(type or print name of person certifying)

\* Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

(Apply Previously Paid Issue Fee In Allowed RCE Application [9-10.2]—page 1 of 2)

(complete the following if applicable)

2. ☐ Payment of any amount of issue fee presently required in addition to the issue fee already paid is made as follows:

- ☐ Attached is a ☐ check ☐ money order in the amount of \$ \_\_\_\_\_  
☐ Authorization is hereby made to charge the amount of \$ \_\_\_\_\_  
☐ to Deposit Account No. \_\_\_\_\_  
☐ to Credit card as shown on the attached credit card information authorization form PTO-2038.


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- ☐ Charge any additional fees required by this paper or credit any overpayment in the manner authorized above.  
☐ A duplicate of this paper is attached.

Reg. No.: 47,288

Tel. No.: (818) 493-2323

Customer No.: 36802



SIGNATURE OF PRACTITIONER

Peter A. Nichols  
(type or print name of practitioner)

PACESETTER, INC.

P.O. Address

15900 Valley View Court  
Sylmar, CA 91392-9221

(Apply Previously Paid Issue Fee In Allowed RCE Application [9-10.2]—page 2 of 2)